This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

## SA1-2E Short Form

030781

07 4 TE 14			T OFFICE USE ONLY	Return completed workbook by email to:
-	ENT OF ACCOUNT			-
	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
-	ems (Short Form)	03/02/21	\$	For additional information, contact the U.S. Copyright Office Licensing Division at:
	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150
A	ACCOUNTING PERIOD COVERED E	BY THIS STATEMENT: (YY	YY/(Period))	
	2020/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20202	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
	Instructions:			
В	Give the full legal name of the owner of the the subsidiary, not that of the parent corpo	,	ary of another corporation, give the full corpo	orate title of
Owner	List any other name or names under which	the owner conducts the business of the	e cable system.	
	If there were different owners during the a statement of account and royalty fee paym		e last day of the accounting period should sub od.	omit a single

Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.

		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		CEQUEL COMMUNICATIONS LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		SUDDENLINK COMMUNICATIONS
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		3027 S SE LOOP 323
		(Number, street, rural route, apartment, or suite number)
		TYLER, TX 75701
		(City, town, state, zip)
С		<b>RUCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	4	IDENTIFICATION OF CABLE SYSTEM:
		CLARENDON, TX
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
	1	(Number, suret, rurar rute, apartment, or suite number)
		(City, town, state, zip code)

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 030781
D Area	Instructions: List each separate community served by the cable system. A "cor separate and distinct community or municipal entity (including unincorporated unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or m city.	mmunity" is the same as a "community unit" as defined in FCC rules: "a d communities within unincorporated areas and including single, discrete will serve as a form of system identification hereafter known as the "first
Served	city.	
First	CITY OR TOWN CLARENDON	STATE TX
First Community	CLARENDON	
ld Rows as Necessary		

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Residential:         • Service to first set         • Service to addition         • FM radio (if separation of the service of th	t nal set(s)		ERS 61	34.99	CAT	EGORY OF SE	RVICE		RATI
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Commercial         Converter         • Residential         • Non-residential         • Non-residential         • Residential         • Non-residential         • Residential         • Non-residential         • Residential         • Non-residential         • Non covered in space         • Secondary </td <td></td> <td></td> <td>3</td> <td>45.05</td> <td></td> <td></td> <td></td> <td></td> <td></td>			3	45.05					
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Services Other Than Secondary Transmissions: Rates Itrinished at cost or (2 amount of the charge enter only the letters Block 1: Give the s Block 2: List any so listed in block 1 and f	, ,					,	,		
Secondary       enter only the letters         Transmissions:       Block 1: Give the s         Rates       Block 2: List any se         listed in block 1 and f									
Block 1: Give the s           Block 2: List any s           listed in block 1 and f			usually	/ billed. If any ra	ates are cl	harged on a var	able per-p	rogram basis,	
Rates         Block 2: List any selected in block 1 and f			he cabl	e system for e	ach of the	applicable servi	cas listad		
listed in block 1 and f								t were not	
brief (two- or three-wo	for which a s	separate charg	ge was r	made or establ	ished. List	t these other ser	vices in th	e form of a	
	ord) descrip	tion and includ	le the ra	ate for each.					
		BLOG	CK 1					BLOCK 2	
CATEGORY OF SER		RATE		GORY OF SER		RATE	CATEG	ORY OF SERVICE	RATE
Continuing Services	s:			ation: Non-res	idential				
Pay cable     Addition	chornel	17.00	•	itel, hotel					
Pay cable—add'l o     Fire protection	cnannel	19.00	_	mmercial v cable					
Fire protection     Burglar protection				y cable y cable-add'l cł	hannel				
Installation: Resider				e protection					
• First set	intai	99.00		rglar protection	1				
Additional set(s)				services:					
• FM radio (if separa		_0.00		connect		40.00			
Converter	rate rate)		•						
-	rate rate)		I ∙Dis	sconnect					
	rate rate)		•	sconnect		25.00			

ting Period: 2	2020/2			FORM SA1-2E. PAGE						
Name	LEGAL NAME OF OWNER O	OF CABLE SYSTEM:		SYSTEM ID						
	CEQUEL COMMUNIC	CATIONS LLC		03078						
	PRIMARY TRANSMITTERS:	TELEVISION								
<b>G</b> Primary	carried by your cable syste FCC rules and regulations	entify every television station (including tr em during the accounting period, <i>except</i> ( in effect on June 24, 1981, permitting the (e)(2) and (4), or 76.63 (referring to 76.61	<ol> <li>stations carried only on a part-til e carriage of certain network progra</li> </ol>	me basis under ams [sections						
nsmitters: elevision	Substitute Basis Stations	as explained in the next paragraph. <b>s:</b> With respect to any distant stations car rules, regulations, or authorizations:	rried by your cable system on a sub	ostitute program						
	• Do <i>not</i> list the station her station was carried <i>only</i> or	re in space G—but do list it in space I (the n a substitute basis.		0,						
	basis. For further information <b>Column 1:</b> List each station	also in space I, if the station was carried ion concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pro	see page (v) of the general instructi ogram services such as HBO, ESF	ions. N, etc. Identify each						
	"WETA-2" as the same on	multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form. <b>Column 2:</b> Give the channel number the FCC assigned to the television station for broadcasting over the air in its community								
	of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast) For the meaning of these to	VRC is channel 4 in Washington, D.C. h case whether the station is a network st ering the letter "N" (for network), "N-M" (fo ), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc	tation, an independent station, or a or network multicast), "I" (for indepe r "E-M" (for noncommercial educati ctions in the paper SA1-2 form.	noncommercial endent), "I-M" onal multicast).						
		on of each station. For U.S. stations, list t adian stations, if any, give the name of the	•							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION						
	KAOVA	2	Е							
	KACV-1		<b>_</b>	AMARILLO. IX						
	KACV-1	4	N	AMARILLO, TX AMARILLO. TX						
as Necessary				AMARILLO, TX						
as Necessary	KAMR-1	4		AMARILLO, TX AMARILLO, TX						
s Necessary	KAMR-1 KCIT-4	4 14.4 4		AMARILLO, TX AMARILLO, TX AMARILLO, TX						
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ıs Necessary	KAMR-1 KCIT-4 KCPN-1 KFDA-1	4 14.4 4 10	N       N	AMARILLO, TX AMARILLO, TX AMARILLO, TX AMARILLO, TX						
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	OWNER OF O							SYSTEM 030
	t every radio s	tation ca	rried on a separate and discrence of the second s					н
eceivable if (1) on the basis of a cor detailed info paper SA1-2 for <b>Column 1:</b> lo <b>Column 2:</b> S <b>Column 3:</b> If ignal, indicate <b>Column 4:</b> G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Co sign of e he statio ion's sign g a checl n's locatio	-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on t each station carried. n is AM or FM. nal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	t the system's hea system's FM ante his point, see pag ed by the cable s e station is licens	adend, and (2) nna, during ce je (v) of the ge ystem as a se ed by the FCC	) it can b ertain sta eneral in parate a	e expected, ated intervals. structions in the. nd discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
CALL SIGN		3/0	LOCATION OF STATION	CALL SIGN		3/0	LOCATION OF STATION	

Accounting Perio							FOR	M SA1-2E. PAGE 5
Name	LEGAL NAME OF OWNER OF O							SYSTEM ID# 030781
	SUBSTITUTE CARRIAGE In General: In space I, identii substitute basis during the ac-	fy every non	network televis riod, under spe	<i>ion program,</i> broadcast by a cific present and former FC	a <i>distant</i> statio C rules, regula	ations, or aut	horizations.	For a further
Substitute Carriage: Special Statement and Program Log	period, was broadcast by a under certain FCC rules, re- Do not use general categori "NBA Basketball: 76ers vs. <b>Column 2:</b> If the program <b>Column 3:</b> Give the call s <b>Column 4:</b> Give the broa the case of Mexican or Can. <b>Column 5:</b> Give the mon first. Example: for May 7 giv <b>Column 6:</b> State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	CONCERI od, did you ion? ', leave the <b>PROGRA</b> itute progra ce, please a of every nor distant stati gulations, o es like "mo' Bulls." n was broad sign of the s dcast static adian statio th and day e "5/7." s when the Example: a er "R" if the nd regulatic	NING SUBST r cable system rest of this pag mon a separa add additional r network televi on and that yo r authorizations vies" or "baske cast live, enter station broadca in's location (th ns, if any, the of when your syst substitute pro program carrie	TUTE CARRIAGE carry, on a substitute bas le blank. If your answer is te line. Use abbreviations ows to the tables. sion program ("substitute ur cable system substitute s. See page (v) of the gene tball." List specific program r "Yes." Otherwise enter "N isting the substitute progra le community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for progra ring the accounting period	s, any nonne "Yes," you mu wherever pos program") that d for the prog eral instruction n titles, for ex lo." m. station is lice station is lice station is lice cable system. 15 p.m. to 6:2 umming that y ; enter the let	twork televis ust complete sible, if their at, during the ramming of ns for furthe ample, "I Lo nsed by the tiffied). numerals, v List the tim (8:30 p.m. sh our system)	The program THES THE program The program	n X NO m s tion n.
	effect on October 19, 1976.	UBSTITUT	E PROGRAM			EN SUBSTI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. T FROM -	IMES — TO	DELETION
					·			
							=	
							= =	
							_	

Accounting Period:	2020/2	FORM SA	1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SI	/STEM ID# 030781
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Entral all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form.         Gross receipts from subscribers for secondary transmission service(s) during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service mount, see	<b>9,007.60</b> ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	263,800	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for th accounting period is \$52.00 Line 1. Royalty fee for accounting period		<u>52.00</u> 0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1		52.00
	1. Base amount under statutory formula       \$       263,800.00         2. Enter amount of gross receipts from space K		
	7. Multiply line 6 by .005 (enter figure here)		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K       \$         2. Base amount under statutory formula       \$         3. Subtract line 2 from line 1	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8         7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	0.00	
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00 15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID # <u>Important:</u> Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2020/2					FORM SA1-2E. PAGE 7.
Name		WNER OF CABLE SYSTEM: IUNICATIONS LLC				SYSTEM ID# 030781
<b>M</b> Channels	to its subscriber 1. Enter the tota system carrie	s, and (2) the cable system's to I number of channels on which	otal num n the cat	ls on which the cable system carried tele ber of activated channels during the acco le	ounting period.	7
	on which the	cable system carried television	n broadc	ast stations		55
N Individual to Be Contacted		BE CONTACTED IF FURTHI about this statement of accoun		DRMATION IS NEEDED (Identify an indiv	vidual to whom	
for Further Information	Name	RODNEY HASKINS			Telephone	(903) 579-3152
	Address	3027 S SE LOOP 323 (Number, street, rural route, apartme TYLER, TX 75701 (City, town, state, zip)	nent, or su	te number)		
	Email	RODNEY.HASKI	INS@A	LTICEUSA.COM	Fax (optional	
O Certification	I, the undersigne     (Owner     (Agent	d, hereby certify that (Check one r other than corporation or par of owner other than corporati	e, <i>but on</i> artnershi tion or p	tified and signed in accordance with Cop ly one, of the boxes.) <b>p)</b> I am the owner of the cable system as in <b>artnership)</b> I am the duly authorized agent i not a corporation or partnership; or	dentified in line 1 of space E	
	I have examined	in line 1 of space B. the statement of account and he e, and correct to the best of my	ereby de	ation) or a partner (if a partnership) of the l clare under penalty of law that all statemen ge, information, and belief, and are made i	ts of fact contained herein	ner of the cable system
				/s/ Alan Dannenbaum electronic signature on the line above to cert nature using an "/s/ signature" (e.g., /s/ Johr	•	
		Typed or printed r	name:	ALAN DANNENBAUM		
				PROGRAMMING position held in corporation or partnership)		
		Date:			2/25/2021	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

BQUEL COMMUNICATIONS LLC       030         SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS       Image: Communication of the state of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:       Image: Communication of the state of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sector of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.°       Image: Communication on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.       Image: Communication on when to exclude these amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the paper SA1-2 form.       Image: Communication on the paper SA1-2 form.       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the total here and list the satellite carrier(s) below.       Image: Communication on the paper SA1-2 form.       Image: Communication on the paper SA1-2 form.       Image: Communication on the paper SA1-2 form.       Image: Communication on therest assessment, see page (viii	unting Period: 2020/2	FORM SA1-2E. PAGE
SPECIAL STATEMENT CONCENSION GROSS RECEIPTS EXCLUSIONS IT is stabilite Home Viewer Act of 1988 amended Tite 17, section 111(d/t)(A), of the Capyright Act by adding the fol- lows: The Statisfies Home Viewer Act of 1988 amended Tite 17, section 111(d/t)(A), of the Capyright Act by adding the fol- lows: The state finance and amounts collected from subscribers receiving secondary transmissions prove information on when to exclude these amounts, see the nots on page (vii) of the general instructions for a capital to the table system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below.  INTEREST ASSESSMENT  You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest rates and enter the sum here  Line 2 Multiply line 1 by the interest rate and enter the sum here  Note:  Autor:  Content is about of days late and enter the sum here  Note:  Content is about of days late and enter the sum here  Note:  Content is about of days late and enter the sum here  Note:  Content is about of 1126 or interest rates and enter the sum here  Note:  Content is about of 1126 or interest rates and enter the sum here  Note:  Content is about of 1126 or interest rates and enter the sum here  Note:  Content is about of 1126 or interest rates and enter the sum here  Note: Content is about of 1136 or interest rates and enter the sum here  Note: Content is about of 1136 or interest rates and enter the sum here  Note: Content is about of 1136 or interest rates and enter the sum here  Note: Content is about of 1136 or interest rate and enter the sum here  Note: Content is about of 1136 or interest rate and enter the sum here  Note: Content is about of 1136 or interest rate and enter the sum here  Note: Content is about of 1136 or interest rate and rate of using and and and adviestions  Content is proved by the number of 11365, which is the interest assessment for one day late.  Nori is the	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
The Statilite Home Vewer Act of 1988 amended Tille 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:       P         "a determining the total number of abuscribers and the gross amounts paid to the cable system for the basic or providing secondary transmissions pursuant to section 119.*       Special Stateme Concentration on when to exclude these amounts, see the note on page (vii) of the general instructions       Special Stateme Concentration on when to exclude these amounts, see the note on page (vii) of the general instructions       Special Stateme Concentration on when to exclude these amounts, see the note on page (viii) of the general instructions       Special Stateme Concentration on when to exclude these amounts, see the note on page (viii) of the general instructions is contained the page SA1-2 form.       Special Stateme Concentration on when to exclude these amounts of gross receipts for secondary transmissions made by satellite carrier(s) below.       Special Stateme Concentration on underpayment.       Special Stateme Concentration on underpayment.         Imme       Maning Address       Maning Address       Maning Address       Interest Assessment.         Interest Assessment.       For an explanation of interest rate* and enter the sum here.       .	QUEL COMMUNICATIONS LLC	03078
Name       Name         Mailing Address       Mailing Address         INTEREST ASSESSMENT       Mailing Address         For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Imerest Assessment.         Line 1       Enter the amount of late payment or underpayment	<ul> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence:</li> <li>"In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."</li> <li>For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form.</li> <li>During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?</li> <li>X NO</li> </ul>	P Special Statement Concerning Gross Receipts Exclusion
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment is comparison of interest assessment for one day late.       Image: Comparison of interest in the interest assessment for one day late.       Image: Comparison of interest parts community served, ID number, and accounting period as given in the original filing.       Image: Comparison of interest page: Comparison of interest page	Name Name	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.       Image: Comparison of interest assessment is comparison of interest assessment for one day late.       Image: Comparison of interest in the interest assessment for one day late.       Image: Comparison of interest parts community served, ID number, and accounting period as given in the original filing.       Image: Comparison of interest page: Comparison of interest page		
Line 1       Enter the amount of late payment or underpayment       x         Line 2       Multiply line 1 by the interest rate* and enter the sum here       -         x	You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
x      days         Line 3 Multiply line 2 by the number of days late and enter the sum here		
Line 3 Multiply line 2 by the number of days late and enter the sum here		Interest Assessmen
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.         ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.         NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.         Owner       Address         ID number       ID number	Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number	Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
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Accounting period	Line 1 Enter the amount of late payment or underpayment	Interest Assessmen

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